



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

HANDLING NEEDLES & SHARPS

Effective Date: July 21, 2011

Policy #: IC-04

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- I. PURPOSE:** To provide a safe disposal method for used needles and sharps.
- II. POLICY:** Personnel will use the biohazard marked disposable needle collection containers whenever disposing of syringes, lancets, needles or any other collection device that is used to puncture a patient's skin, or disposable razors and sharps. The containers are located in each Medication Room available to the nursing personnel, in the Laboratory, Dental Office, and Medical Clinic. Smaller biohazard marked disposable containers are available for remote use. Replacements for both containers are available from the Warehouse.
- III. DEFINITIONS:**
 - A. Biohazard: Bio - combining form denoting relationship to life.
Hazard - a chance of being injured or harmed; danger.
- IV. RESPONSIBILITIES:**
 - A. Nursing Staff - To always place sharps in biohazard marked containers. To arrange transportation of containers to the Heating Plant for proper disposal.
 - B. Teamsters - To transport the biohazard containers to the Heating Plant.
 - C. Operating Engineer (Heating Plant) - To autoclave biohazard materials prior to proper disposal.
 - D. Maintenance Supervisor - Will maintain proper operation of the autoclave to assure sterility and send a report to the Infection Preventionist quarterly.
- V. PROCEDURES:**
 - A. Handle sharp objects carefully. Always wear gloves.
 - 1. Do not cut, bend, break or routinely reinsert used needles into original sheath by hand.

Do not detach used needle from syringe. For needles attached to IV tubing, remove the capped needle from the tubing and discard into approved container.

2. Discard sharp objects intact immediately after use into the biohazard marked impervious needle disposal container conveniently placed in all clinical areas, or in the smaller portable container for remote use.
3. Contaminated needles are never to be recapped.
4. Personnel should never reach into the needle container.
 - a. Sharps containers must be kept upright, replaced routinely to avoid overfilling. When removed from work area, containers will be upright and closed to prevent spillage or protrusions during handling.
 - b. When the containers are 3/4 full, it is the responsibility of the medication nurse to make arrangements for the teamster to take the container to the Heating Plant. A clean container located on the unit should be put in place (at the same time the 3/4 full container is removed) by the medication nurse.
 - c. The Heating Plant will decontaminate the containers by autoclaving the container for two hours at 250 degrees Fahrenheit at fifteen pound pressure and verify decontamination by a chemical indicator. After decontamination, the containers can be dispensed to proper disposal sites as specified by local, state and federal law.
 - d. Immediately report all accidents involving any used needle or sharp to the Infection Preventionist.

B. Disposable Razors / Electric Razors

1. Electric razors are to be dedicated to individual patient use only; they are not to be shared.
2. Cleaning Electric Razors
 - a. Following use by each individual patient, razor is to be thoroughly cleaned.
 - Make sure razor is unplugged.
 - Brush razor completely, removing all hair, especially on heads of razor. Open razor, brush inside, and then wipe inside with alcohol towelettes or sani-cloth wipes. Clean razor over garbage can to collect waste.
 - Wipe top of razor head completely with alcohol towelettes or sani-cloth wipes.
 - Return razor to proper storage area.
 - Make sure that this cleaning procedure is followed after each

patient's use of the razor.

3. Disposable Razors

- a. Prior to patient use, the unit treatment teams will determine if the patient can use the product safely. Psychiatric Technicians will assist with assessment and training as needed.
- a. Razors will be locked securely in designated area.
- b. A large sharp sharps container will be kept in the same area as the razors. A log will also be maintained in this area to insure that razors are accounted for. The log should note patients who can use razors, patients who require supervision and patients who are not allowed this privilege due to safety reasons used.
- c. Once the patient has been cleared to use a razor safely by the Treatment Team, staff may give the patient a razor blade. The patient is expected to return the razor as soon as shaving is completed. The staff person must mark the time and to whom the razor was given in the log book. When the razor is returned, the staff person must record this in the log book. Used razors are disposed of in the sharps container using the same procedure outlined in this policy.
- d. If the patient has not returned the razor in one hour, the staff person responsible for giving out the razor must investigate and report to the nurse in charge.

- VI. **REFERENCES:** Dorlands Illustrated Medical Dictionary, Twenty Fifth Edition; The American Heritage Dictionary, Second College Edition
- VII. **COLLABORATED WITH:** Central Supply Clerk, Nursing Services, and Infection Control Committee
- VIII. **RESCISSIONS:** # IC-04, *Handling Needles and Sharps* dated November 9, 2009; # IC-04, *Handling Needles and Sharps* dated October 30, 2006; IC-04, *Handling Needles and Sharps* dated December 18, 2002; Policy # IC-04, *Handling Needles and Sharps* dated September 1, 2002; Policy # IC-04-99-R, *Handling Needles and Sharps* dated January 31, 1999; and Policy # IC-02-05 (3/7/95)
- IX. **DISTRIBUTION:** All Hospital Policy Manuals
- X. **ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review (Attachment B) per M.C.A. § 307-106-330.

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XI. FOLLOW-UP RESPONSIBILITY: Infection Preventionist

XII. ATTACHMENTS: None

_____/____/____
John W. Glueckert Date/Time
Hospital Administrator

_____/____/____
Thomas Gray, MD Date/Time
Medical Director